Chapter you are filing under:	
☐ Chapter 7	
☐ Chapter 11	
☐ Chapter 12	
■ Chapter 13	☐ Check if this a amended filing
	☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	ır full name		
	Writ	e the name that is on	Leticia	
	pict	r government-issued ure identification (for mple, your driver's	First name	First name
	licer	nse or passport).	Middle name	Middle name
		g your picture	Arredondo De Castillo	
		ntification to your eting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you nun Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-5949	

Debtor 1 Leticia Arredondo De Castillo

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	247 Exie Lane Dinuba, CA 93618	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Tulare			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Del	otor 1 Leticia Arredondo	De Castil	lo			Case r	number (if known)		
Par	t 2: Tell the Court About	Your Bankr	uptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapte	er 7						
		☐ Chapte	er 11						
		☐ Chapte	er 12						
		■ Chapte	er 13						
8.	How you will pay the fee			entire fee when I file my po					
		orde		u may pay. Typically, if you a attorney is submitting your paddress.					
		☐ I need to pay the fee in installments. If you choose this option, sign and attach the Applit The Filing Fee in Installments (Official Form 103A).						ation for Individuals to Pay	
		but i app	s not requies to you	t my fee be waived (You ma uired to, waive your fee, and ur family size and you are un on to Have the Chapter 7 Filir	may do so able to pa	only if your inco the fee in install	me is less than 150% oments). If you choose t	of the official poverty line that this option, you must fill out	
9.	Have you filed for bankruptcy within the	□ No.							
	last 8 years?	Yes.							
			District	Eastern District Of California	When	4/26/12	Case number	12-13774	
			District		When	-	Case number	-	
			District		When		Case number		
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor				Relationship to y	rou	
			District		When		Case number, if		
			Debtor		_		Relationship to y	ou	
			District		When		Case number, if	known	
11.	Do you rent your	■ No.	Go to li	ine 12.					
	residence?	☐ Yes.	Has vo	ur landlord obtained an evict	ion judam	ent against vou?			
		□ 165.		No. Go to line 12.	jaagiii	agaor your			
				Yes. Fill out <i>Initial Statemen</i>	nt Ahout a	Eviction Judama	ent Against Vou (Form	101A) and file it as part of	
			ш	this bankruptcy petition.	n About al	viction duagine	m ngamot rou (i oilli	10 17 tj and mo it as part of	

Deb	tor 1 Leticia Arredondo	De Cast	illo		Case number (if known)			
Part	Report About Any Bu	sinesses	You Own	as a Sole Proprie	etor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	usiness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any Number, Street, City, State & ZIP Code				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	Number, Street, City, State & ZIP Code				
	it to this petition.		Check	the appropriate bo	oox to describe your business:			
				Health Care Busin	siness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	al Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))			
				Commodity Broke	xer (as defined in 11 U.S.C. § 101(6))			
				None of the above	ve			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	rou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate adlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of erations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure 11 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am not filing under Chapter 11.					
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am fi	ling under Chapter	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	t 4: Report if You Own or	Have Any	Hazardo	us Property or An	ny Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat	☐ Yes.						
	of imminent and identifiable hazard to	— 165.	What is t	he hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			ate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?				
	- ,				Number, Street, City, State & Zip Code			

Debtor 1 Leticia Arredondo De Castillo

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

	ca		

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Leticia Arredondo De Cas			tillo Case number (if known)			
Par	t 6: Answer These Quest	ions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily of individual primarily for a per			ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily I money for a business or inv			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not consu	mer debts or busines	ss debts
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	er 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. are paid that funds will be a	Do you estimate that a available to distribute to	ofter any exempt prop unsecured creditors?	erty is excluded and administrative expenses?
	administrative expenses		□ No			
	are paid that funds will be available for		□Yes			
	distribution to unsecured creditors?					
18.	How many Creditors do	1 -49		□ 1,000-5,000)	☐ 25,001-50,000
	you estimate that you owe?	☐ 50-99		5001-10,00	0	5 0,001-100,000
	OWC:	1 00-1		☐ 10,001-25,0	000	☐ More than100,000
		□ 200-9	99			
19.		□ \$0 - \$	•	□ \$1,000,001		☐ \$500,000,001 - \$1 billion
19.	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,00		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		Δ ψοσο,	, , , , , , , , , , , , , , , , , , ,			
20.	How much do you estimate your liabilities	□ \$0 - \$		□ \$1,000,001 □ \$1,000,001		□ \$500,000,001 - \$1 billion
	to be?		01 - \$100,000 001 - \$500,000	□ \$10,000,00 □ \$50,000.00	1 - \$50 million 1 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$300,000 001 - \$1 million		01 - \$500 million	☐ More than \$50 billion
Par	t 7: Sign Below					
_	you	I have ex	amined this petition, and I de	eclare under penalty of	perjury that the inforn	nation provided is true and correct.
	•	If I have	chosen to file under Chanter	7 I am aware that I ma	y proceed if eligible	under Chapter 7, 11,12, or 13 of title 11,
						noose to proceed under Chapter 7.
			rney represents me and I did t, I have obtained and read t			t an attorney to help me fill out this
		I request	relief in accordance with the	chapter of title 11, Unit	ed States Code, spe	cified in this petition.
		bankrupto and 3571	cy case can result in fines up	to \$250,000, or imprise		or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Leticia	cia Arredondo De Castillo Arredondo De Castillo e of Debtor 1	<u>10 </u>	Signature of Debto	r 2
		· ·		0	Executed as	
		Executed	on November 15, 201 MM / DD / YYYY	<u> </u>	Executed on MM	/ DD / YYYY

Debtor 1	Leticia Arredondo De Castillo	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Scott Lyons	Date	November 15, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Scott Lyons 103931		
Printed name		
Law Office of Scott Lyons		
Firm name		
1010 West Main Street		
Visalia, CA 93291		
Number, Street, City, State & ZIP Code		
Contact phone 559-636-8122	Email address	scottlyons@lyons4justice.com
103931 CA		
Bar number & State		

Certificate Number: 17082-CAE-CC-031737633



CERTIFICATE OF COUNSELING

I CERTIFY that on October 9, 2018, at 3:46 o'clock PM MST, LETICIA ARREDONDO DE CASTILLO received from Summit Financial Education, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: October 9, 2018 By: /s/Denis L Escamilla De Garcia

Name: Denis L Escamilla De Garcia

Title: Certified Credit Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill in this information to identify your case:						
Debtor 1	Leticia Arredondo	Leticia Arredondo De Castillo				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F CALIFORNIA			
Case number						

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	213,718.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,710.63
	1c. Copy line 63, Total of all property on Schedule A/B	\$	217,428.63
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	189,009.37
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	523.00
	Your total liabilities	\$	189,532.37
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,068.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,783.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	hedules.
7.	■ Yes What kind of debt do you have?		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Leticia Arredondo De Castillo

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 2,657.63

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total clair	n
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

11	113/10				Case 10-14009			
Fill	in this inform	nation to identify	your case and th	is filin	g:			
Deb	tor 1	Leticia Arred	dondo De Casti	llo				
		First Name	Middle		Last Name			
	otor 2	First Name	Middlo	Nome	Loot Nome			
(Spot	use, if filing)	First Name	Middle	Name	Last Name			
Unit	ed States Bar	nkruptcy Court for	the: EASTERN	DISTR	ICT OF CALIFORNIA			
Cas	e number							☐ Check if this is a
								amended filing
Off	ficial Fo	rm 106A/E	3					
		e A/B: Pi	-					40/4E
					t only once. If an asset fits in more than one o	atamam, lia	1 the ecet in	12/15
hink nfori	it fits best. Be mation. If more ver every quest	e as complete and a e space is needed, tion.	accurate as possibl attach a separate sh	e. If two neet to t	married people are filing together, both are e his form. On the top of any additional pages, I Estate You Own or Have an Interest In	qually respo	onsible for su	pplying correct
1. Do	you own or h	ave any legal or eq	uitable interest in a	ny resid	lence, building, land, or similar property?			
	No. Go to Part	2.						
	Yes. Where is	the property?						
1.1				Wha	t is the property? Check all that apply			
	247 Exie L	ane			Single-family home	Do not dedu	uct secured cla	ims or exemptions. Put
	Street address, it	f available, or other des	cription		Duplex or multi-unit building	the amount	of any secured	I claims on Schedule D:
					Condominium or cooperative	Creditors W	110 nave Claiii	is Secured by Property.
				_	Manufactured or makile home			
	Dinuba	CA	93618-0000		Manufactured or mobile home	Current val		Current value of the
	City	State	ZIP Code			entire prop	3,718.00	portion you own? \$213,718.0
	Oity	Clate	Zii Odde		Timeshare			
					Other			our ownership interest ancy by the entireties, o
				Who	has an interest in the property? Check one	a life estate	e), if known.	
				_	Debtor 1 only			
	Tulare							
	County				, , , , , , , , , , , , , , , , , , , ,			munity property
				045-	The roads only of the dobtors and another		tructions)	
					r information you wish to add about this item erty identification number:	, such as lo	cai	
				p. • p	,			
					your entries from Part 1, including any e			\$213,718.00
	pages you ha	ave attached for	Part 1. Write that	numbe	er here	:	=>	φε 13,7 10.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Deb	otor 1 <u>L</u>	eticia Arredondo De Castill	lo	Case number (if known)	
3. C	ars, vans,	trucks, tractors, sport utility v	ehicles, motorcycles		
	l No				
	Yes				
2.4	Makai	GMC	Who has an interest in the preparty? Obstant	Do not deduct sec	ured claims or exemptions. Put
3.1	Make: Model:	Yukon	Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2004	■ Debtor 1 only □ Debtor 2 only		
		nate mileage: 127000	Debtor 1 and Debtor 2 only	Current value of t entire property?	the Current value of the portion you own?
		ormation:	☐ At least one of the debtors and another		
		e has some minor tic damage	☐ Check if this is community property (see instructions)	\$2,707	\$2,707.00
5 1			wn for all of your entries from Part 2, includir		\$2,707.00
.‡	oages you	have attached for Part 2. Write	e that number here	=>	Ψ2,101.00
Part	3: Descri	be Your Personal and Household	Items		
Do	you own o	r have any legal or equitable i	nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
		goods and furnishings Major appliances, furniture, linen scribe	s, china, kitchenware		
		Household Fu	rniture		\$300.00
		Televisions and radios; audio, vio including cell phones, cameras,	. , , ,	orinters, scanners; music c	ollections; electronic devices
		TOTOVISION AND			φοσσ.σσ
	•	Antiques and figurines; paintings other collections, memorabilia, c	s, prints, or other artwork; books, pictures, or otheollectibles	er art objects; stamp, coin,	or baseball card collections;
<i>I</i>	Examples:	musical instruments	and other hobby equipment; bicycles, pool tables	s, golf clubs, skis; canoes a	and kayaks; carpentry tools;
		3011DE			
	Firearms Examples No	: Pistols, rifles, shotguns, ammur	nition, and related equipment		

Dob	to # 1	Latinia Asses		2- 0411-	Coop number //f live	
Deb		Leticia Arre	aonao L	De Castillo	Case number (if kno	wn)
	l Yes.	Describe				
	Clothes Examp		lothes, fui	rs, leather coats, design	er wear, shoes, accessories	
] No					
	Yes.	Describe				
			Famil	y Apperal		\$200.00
	lewelry <i>Examp</i>		ewelry, co	stume jewelry, engagen	nent rings, wedding rings, heirloom jewelry, watches, gen	ns, gold, silver
	No					
L	I Yes.	Describe				
		rm animals bles: Dogs, cats,	birds. ho	rses		
_	No		,			
	l Yes.	Describe				
		ner personal ar	nd house	hold items you did not	already list, including any health aids you did not lis	t
	No Yes.	Give specific in	formation			
		·				
15.					3, including any entries for pages you have attached	\$1,000.00
	IOI Fa	iri 3. Write that	number	nere		
Part	4: Des	scribe Your Finar	ncial Asset	ts		
Do y	ou ow	n or have any	legal or e	equitable interest in an	y of the following?	Current value of the portion you own?
						Do not deduct secured
						claims or exemptions.
16. C		oles: Money you	have in y	our wallet, in your home	, in a safe deposit box, and on hand when you file your p	etition
_	No					
L	ı Yes					
					ts; certificates of deposit; shares in credit unions, brokera	ige houses, and other similar
] No	institutions	. If you ha	ve multiple accounts wit	th the same institution, list each.	
					Institution name:	
					D. J. (4	40.00
			17.1.	Checking	Bank of America Acct# 5017	\$3.63
				Representative		
			17.2.	Payee Account	Bank of America Acct# 7209	\$0.00
				Representative		
			17.3.		Bank of America Acct# 6776	\$0.00
18. E	Bonds, Examp	mutual funds,	or public	cly traded stocks ent accounts with broke	rage firms, money market accounts	
_	No		,			
	1 Yes			Institution or issuer nan	ne:	
	Non-pu joint v		tock and	interests in incorpora	ted and unincorporated businesses, including an inte	erest in an LLC, partnership, and
	l _{No}	entur c				

Debtor 1	Leticia Ai	rredondo De Castillo	Case number (if known)	
☐ Yes.	. Give specific	information about them Name of entity:	% of ownership:	
Nego: Non-r ■ No	tiable instrume negotiable inst	orporate bonds and other negotiable and no ents include personal checks, cashiers' checks, ruments are those you cannot transfer to some information about them Issuer name:	promissory notes, and money orders.	
Exam ■ No	•	in IRA, ERISA, Keogh, 401(k), 403(b), thrift sa ount separately.	ivings accounts, or other pension or profit-sharing plan	s
00 0		•	on name.	
Your	share of all un	Ind prepayments used deposits you have made so that you may ents with landlords, prepaid rent, public utilities	continue service or use from a company (electric, gas, water), telecommunications companies,	or others
		Institut	ion name or individual:	
23. Annui	ities (A contrad	ct for a periodic payment of money to you, either	er for life or for a number of years)	
☐ Yes.		Issuer name and description.		
26 U.S		ation IRA, in an account in a qualified ABLE 1), 529A(b), and 529(b)(1).	E program, or under a qualified state tuition progra	m.
■ No □ Yes.		Institution name and description. Separately f	file the records of any interests.11 U.S.C. § 521(c):	
■ No	-	r future interests in property (other than any information about them	thing listed in line 1), and rights or powers exercis	able for your benefit
Exam ■ No	nples: Internet	s, trademarks, trade secrets, and other intelled domain names, websites, proceeds from royalt information about them		
	•			
		es, and other general intangibles permits, exclusive licenses, cooperative assoc	iation holdings, liquor licenses, professional licenses	
☐ Yes.	. Give specific	information about them		
Money or	property owe	ed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax re	efunds owed t	o you		
■ No	0			
⊔ Yes.	. Give specific	information about them, including whether you	already filed the returns and the tax years	
■ No	ples: Past due	or lump sum alimony, spousal support, child s	support, maintenance, divorce settlement, property set	element
	<i>iples:</i> Unpaid v	neone owes you vages, disability insurance payments, disability unpaid loans you made to someone else	benefits, sick pay, vacation pay, workers' compensat	ion, Social Security

Debtor 1	Leticia Arredondo De Castillo	Case number (if known)	
☐ Yes.	Give specific information		
Exam _i ■ No	sts in insurance policies ples: Health, disability, or life insurance; health savings account (HSA); credi Name the insurance company of each policy and list its value. Company name:	it, homeowner's, or renter's insurar Beneficiary:	Surrender or refund
			value:
If you somed	Iterest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance poone has died. Give specific information	licy, or are currently entitled to rec	eive property because
□ res.	Give specific information		
Exam _i ■ No	s against third parties, whether or not you have filed a lawsuit or made ples: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim	a demand for payment	
34. Other	contingent and unliquidated claims of every nature, including counterc	laims of the debtor and rights to	set off claims
■ No □ Yes.	Describe each claim		
35. Any fir	nancial assets you did not already list		
■ No	Give specific information		
	the dollar value of all of your entries from Part 4, including any entries art 4. Write that number here		\$3.63
Part 5: De	escribe Any Business-Related Property You Own or Have an Interest In. List any r	real estate in Part 1.	
-	own or have any legal or equitable interest in any business-related property?		
_	o to Part 6.		
☐ Yes. (Go to line 38.		
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Have ar you own or have an interest in farmland, list it in Part 1.	n Interest In.	
	u own or have any legal or equitable interest in any farm- or commercia	I fishing-related property?	
_	Go to Part 7. s. Go to line 47.		
□ res	s. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Ak	pove	
Exam	u have other property of any kind you did not already list? ples: Season tickets, country club membership		
■ No □ Yes.	Give specific information		
54. Add 1	the dollar value of all of your entries from Part 7. Write that number her	e	\$0.00
	· · · · · · · · · · · · · · · · · · ·		

Debtor 1 Case number (if known) Leticia Arredondo De Castillo List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$213,718.00 Part 2: Total vehicles, line 5 56. \$2,707.00 57. Part 3: Total personal and household items, line 15 \$1,000.00 58. Part 4: Total financial assets, line 36 \$3.63 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$3,710.63 Copy personal property total \$3,710.63 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$217,428.63

Schedule A/B: Property

Fill in this inform	Fill in this information to identify your case:							
Debtor 1	Leticia Arredondo De Castillo							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F CALIFORNIA					
Case number								
(if known)					☐ Check if this is ar			
					amended filing			
				•				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own			Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
247 Exie Lane Dinuba, CA 93618 Tulare County	\$213,718.00	\$75,000.00		C.C.P. § 704.730
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2004 GMC Yukon 127000 miles Vehicle has some minor cosmetic	\$2,707.00		\$3,050.00	C.C.P. § 704.010
damage Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Household Furniture Line from Schedule A/B: 6.1	\$300.00		\$300.00	C.C.P. § 704.020
Line from Schedule A/B. V. I			100% of fair market value, up to any applicable statutory limit	
Television and Cell Phone Line from Schedule A/B: 7.1	\$500.00		\$500.00	C.C.P. § 704.020
Line Horr Schedule A.B. 111			100% of fair market value, up to any applicable statutory limit	
Family Apperal Line from Schedule A/B: 11.1	\$200.00		\$0.00	C.C.P. § 704.010
Line from Scriedule Arb. 11.1			100% of fair market value, up to any applicable statutory limit	

	otor 1	Leticia Arredondo De Castillo	Case number (if known)					
		description of the property and line on dule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption			
			Copy the value from Check only one box for each exemption. Schedule A/B					
	Che 5017	cking: Bank of America Acct#	\$3.63		\$3.63	C.C.P. § 704.080		
	Line from Schedule A/B: 17.1				100% of fair market value, up to any applicable statutory limit			
3.	Are v	ou claiming a homestead exemption	of more than \$160.37	5?	any applicable statutory limit			
٠.	(Subj	(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)						
		No						
		Yes. Did you acquire the property cover	ed by the exemption wi	thin 1	,215 days before you filed this case	?		
		□ No						
		Π Yes						

11/10/10		0430 10 14000			'
Fill in this inform	nation to identify you	ır case:			
Debtor 1	Leticia Arredon	do De Castillo			
	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF CALIFORNIA			
Case number				_	if this is an ded filing
	4000				
Official Form		W			
Schedule	D: Creditors	Who Have Claims Secured	by Property	<u>y</u>	12/15
is needed, copy the number (if known).		If two married people are filing together, both are equout, number the entries, and attach it to this form. Or your property?			
☐ No. Check	this box and submit tl	his form to the court with your other schedules. Yo	ou have nothing else to	o report on this form.	
Yes. Fill in	all of the information	below.			
Part 1: List Al	I Secured Claims				
for each claim. If me	ore than one creditor has	more than one secured claim, list the creditor separately is a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Shellpoint Servicing	t Mortgage	Describe the property that secures the claim:	\$189,009.37	\$213,718.00	\$0.00
P.O. Box 7 Cincinnati	740039 i, OH	247 Exie Lane Dinuba, CA 93618 Tulare County As of the date you file, the claim is: Check all that apply. □ Contingent			
Number, Street,	City, State & Zip Code	☐ Unliquidated			
Who owes the de		Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only		An agreement you made (such as mortgage or sectoral loan)	ured		
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	ne debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this cla	aim relates to a	Other (including a right to offset)			
Date debt was incu	urred	Last 4 digits of account number 9943			
Add the dollar va	due of your entries in C	olumn A on this page. Write that number here:	\$189,00	9.37	
	•	the dollar value totals from all pages.	\$100,00		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$189,009.37

Write that number here:

11/10/10		96	13C 10 1+000				•
Fill in this info	ormation to identify your c	ase:					
Debtor 1	Leticia Arredondo	De Castillo					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States I	Bankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA				
Case number							
(if known)					_	Check if this	
						amended filir	ıy
Official Fo	rm 106E/F						
	E/F: Creditors W	ho Have Unsecu	red Claims			12	2/15
	and accurate as possible. Use			or creditors with NON	PRIORITY cla		
 Do any cred No. Go to Yes. List all of you identify what possible, list 	All of Your PRIORITY Unstitutes have priority unsecured of Part 2. Dur priority unsecured claims type of claim it is. If a claim has the claims in alphabetical ordere than one creditor holds a par	I claims against you? If a creditor has more than construction both priority and nonpriority according to the creditor's necessity.	amounts, list that claim here a ame. If you have more than tv	and show both priority a	nd nonpriority	amounts. As r	much as
	anation of each type of claim, so						
(,,,		,	Total claim	Priority		oriority
2.1 Franc	hise Tax Board	Last 4 digits of	account number	\$0.00	amount	amoı \$ <i>0.00</i>	unt \$0.00
Bank P.O. I	Creditor's Name ruptcy Section, MS: A-3 Box 2952	340 When was the	debt incurred?		-		
	nmento, CA 95812-2952 r Street City State Zlp Code	As of the date y	ou file, the claim is: Check	all that apply			
	red the debt? Check one.	☐ Contingent	,				
■ Debtor	1 only	☐ Unliquidated					
☐ Debtor	2 only	□ Disputed					
_	1 and Debtor 2 only	•	ITY unsecured claim:				
_	one of the debtors and another	☐ Domestic su	pport obligations				
☐ Check	if this claim is for a commun	ity debt Taxes and co	ertain other debts you owe the	government			
	n subject to offset?	´ _	eath or personal injury while v	· ·			

■ No

☐ Yes

 \square Other. Specify

Notice for possible and potential taxes owed

Debtor	1 Leticia Arredondo De Castillo	Case nur	mber (if known)		
2.2	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	Centralized Insolvency	When was the debt incurred?			
	Operations P.O. Box 7346				
	Philadelphia, PA 19101-7346				
14/	Number Street City State Zlp Code	As of the date you file, the claim is: Check all t	hat apply		
_	ho incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	At least one of the debtors and another	Domestic support obligations			
	Check if this claim is for a community debt	Taxes and certain other debts you owe the go			
_	the claim subject to offset?	Claims for death or personal injury while you	were intoxicated		
	l Yes	Other. Specify Notice for possible a	nd potential taxes o		
		•	•		
2.3	United States Attorney Priority Creditor's Name	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	for Internal Revenue Service 2500 Tulare Street Ste. 4401 Fresno, CA 93721-1318	When was the debt incurred?			
,	Number Street City State Zlp Code	As of the date you file, the claim is: Check all t	hat apply		
WI	ho incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	At least one of the debtors and another	☐ Domestic support obligations			
	Check if this claim is for a community debt	■ Taxes and certain other debts you owe the go	overnment		
Is	the claim subject to offset?	☐ Claims for death or personal injury while you	were intoxicated		
	No	Other. Specify			
	Yes	Notice for possible a	nd potential taxes o	wed	
2.4	United States Department of Justice	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name	Last 4 digits of account number			
	Civil Trial Section, Western	When was the debt incurred?			
	Region Box 683, Ben Franklin Station Washington, DC 20044				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all t	hat apply		
WI	ho incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	At least one of the debtors and another	☐ Domestic support obligations			
	Check if this claim is for a community debt	■ Taxes and certain other debts you owe the go			
	the claim subject to offset?	☐ Claims for death or personal injury while you	were intoxicated		
	No	Other. Specify			
	Yes	Notice for possible a	na potentiai taxes d	wea 	
Part 2:	List All of Your NONPRIORITY Unsecu	ured Claims			
3. Do a	any creditors have nonpriority unsecured clain	ns against you?			
	No. You have nothing to report in this part. Submit	this form to the court with your other schedules.			
	Yes.				

Debtor 1	I eticia	Arredondo	De Castillo
	Leucia	AITEUUITUU	De Gasillio

Case number (if	known)	١
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un	st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each c an one creditor holds a particular claim, list the other	aim. For each claim listed, identify what	type of claim it is. Do not list claims already inc	cluded in Part 1. If more
	art 2.	•	, ,	Total claim
	EDC/Enhanced Basevany Corn	Lock A digita of poor with number	9255	
4.1	ERC/Enhanced Recovery Corp Nonpriority Creditor's Name	Last 4 digits of account number	8255	\$210.0
	Attn: Bankruptcy 8014 Bayberry Road	When was the debt incurred?	Opened 05/17	-
	Jacksonville, FL 32256 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir		
	Yes	■ Other. Specify Collection	Attorney At T U-Verse	-
4.2	ERC/Enhanced Recovery Corp	Last 4 digits of account number	5875	\$209.0
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 09/17	
	8014 Bayberry Road		<u>- Cponica co, 11</u>	_
	Jacksonville, FL 32256			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	u Ciaiiii.	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Collection	Attorney At T Wireline	_
4.3	ERC/Enhanced Recovery Corp	Last 4 digits of account number	4167	\$104.0
	Nonpriority Creditor's Name	_		Ψ10-110
	8014 Bayberry Rd	When was the debt incurred?	Opened 07/17	_
	Jacksonville, FL 32256 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	•	
	☐ Yes	Other Specify Collection	Attornev At T Mobility	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Debtor 1 Leticia Arredondo De Castillo

Case number (if known)

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				To	otal Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	To \$	otal Claim
Total claims				·	
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	523.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	523.00

Fill in this information to identify your case:								
Debtor 1	Leticia Arredondo De Castillo							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		EASTERN DISTRICT C	F CALIFORNIA					
Case number								

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	Jity		Oldio	211 OOGC	

Debtor 1	Leticia Arredono	lo De Castillo		
	First Name	Middle Name	Last Name	
Debtor 2 Spouse if, filin	ng) First Name	Middle Name	Last Name	
•	tes Bankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA	
Case numb	per			☐ Check if this is an amended filing
Official	l Form 106H			
	ule H: Your Coc	lehtors		12/15
Jenea	ule II. Tour cou	icotoi 3		12/13
eople are ill it out, ar our name	filing together, both are equ	ually responsible for suppe boxes on the left. Attach i). Answer every question.	lying correct informat the Additional Page t	as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Page, to this page. On the top of any Additional Pages, write
1. 50	you have any codebiors: (II	you are ming a joint case, t	do not list either spouse	as a codebior.
■ No □ Yes				
	nin the last 8 years, have yo a, California, Idaho, Louisiana			ry? (Community property states and territories include ington, and Wisconsin.)
П Мо	Go to line 3.			
	. Did your spouse, former spo	ouse, or legal equivalent live	with you at the time?	
		, 0	,	
	□ No ■ Yes.			
	■ Yes.			
	In which community star	te or territory did you live?	-NONE-	. Fill in the name and current address of that person.
	In which community sta	te or territory did you live?	-NONE-	Fill in the name and current address of that person.
	Name of your spouse, former sp	pouse, or legal equivalent	-NONE-	Fill in the name and current address of that person.
in line Form	Name of your spouse, former spouse, Street, City, State & Ziumn 1, list all of your codeb 2 again as a codebtor only	pouse, or legal equivalent ip Code stors. Do not include your if that person is a guarant	spouse as a codebtor	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official
in line Form out Co	Name of your spouse, former spouse, former spouse, Street, City, State & Zitumn 1, list all of your codeb 2 again as a codebtor only 106D), Schedule E/F (Official	pouse, or legal equivalent ip Code stors. Do not include your if that person is a guarant al Form 106E/F), or Schedi	spouse as a codebtor	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official
in line Form out Co	Name of your spouse, former spouse, Number, Street, City, State & Ziumn 1, list all of your codeb 2 again as a codebtor only 106D), Schedule E/F (Official olumn 2.	pouse, or legal equivalent ip Code stors. Do not include your if that person is a guarant al Form 106E/F), or Schedi	spouse as a codebtor	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fil **Column 2: The creditor to whom you owe the debt Check all schedules that apply:
in line Form out Co	Name of your spouse, former spouse, Number, Street, City, State & Ziumn 1, list all of your codeb 2 again as a codebtor only 106D), Schedule E/F (Official olumn 2.	pouse, or legal equivalent ip Code stors. Do not include your if that person is a guarant al Form 106E/F), or Schedi	spouse as a codebtor	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official DGG). Use Schedule D, Schedule E/F, or Schedule G to fil Column 2: The creditor to whom you owe the debt Check all schedules that apply:
in line Form out Co	Name of your spouse, former spouse, Street, City, State & Ziumn 1, list all of your codeb 2 again as a codebtor only 106D), Schedule E/F (Official column 2. Column 1: Your codebtor Number, Street, City, State and 2	pouse, or legal equivalent ip Code stors. Do not include your if that person is a guarant al Form 106E/F), or Schedi	spouse as a codebtor	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official DGG). Use Schedule D, Schedule E/F, or Schedule G to fil Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line
in line Form out Co	Name of your spouse, former spouse, Street, City, State & Ziumn 1, list all of your codeb 2 again as a codebtor only 106D), Schedule E/F (Official column 2. Column 1: Your codebtor Number, Street, City, State and 2	pouse, or legal equivalent ip Code stors. Do not include your if that person is a guarant al Form 106E/F), or Schedi	spouse as a codebtor	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official DGG). Use Schedule D, Schedule E/F, or Schedule G to fil Column 2: The creditor to whom you owe the debt Check all schedules that apply:
in line Form out Co	Name of your spouse, former spouse, Street, City, State & Ziumn 1, list all of your codeb 2 again as a codebtor only 106D), Schedule E/F (Official column 2. **Column 1: Your codebtor** Name, Number, Street, City, State and Zivame.	pouse, or legal equivalent ip Code stors. Do not include your if that person is a guarant al Form 106E/F), or Schedu	spouse as a codebtor tor or cosigner. Make ule G (Official Form 10	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fil Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line
in line Form out Co	Name of your spouse, former spouse, Street, City, State & Ziumn 1, list all of your codeb 2 again as a codebtor only 106D), Schedule E/F (Official column 2. **Column 1: Your codebtor** Name, Number, Street, City, State and Zivame.	pouse, or legal equivalent ip Code stors. Do not include your if that person is a guarant al Form 106E/F), or Schedu	spouse as a codebtor tor or cosigner. Make ule G (Official Form 10	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official DGG). Use Schedule D, Schedule E/F, or Schedule G to fil Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line
in line Form out Co	Name of your spouse, former spouse, Street, City, State & Ziumn 1, list all of your codeb 2 again as a codebtor only 106D), Schedule E/F (Official column 2. **Column 1: Your codebtor** Name Number, Street, City, State and 2. **Name** Number** Street** City**	pouse, or legal equivalent ip Code stors. Do not include your if that person is a guarant al Form 106E/F), or Schedu	spouse as a codebtor tor or cosigner. Make ule G (Official Form 10	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official DGG). Use Schedule D, Schedule E/F, or Schedule G to fil Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line
in line Form out Co	Name of your spouse, former spouse, Street, City, State & Ziumn 1, list all of your codeb 2 again as a codebtor only 106D), Schedule E/F (Official column 2. **Column 1: Your codebtor** Name Number, Street, City, State and 2. **Name** Number** Street** City**	pouse, or legal equivalent ip Code stors. Do not include your if that person is a guarant al Form 106E/F), or Schedu	spouse as a codebtor tor or cosigner. Make ule G (Official Form 10	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official DGG). Use Schedule D, Schedule E/F, or Schedule G to fil Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line

Schedule H: Your Codebtors

Fill	in this information to identify your c	.350.			1		
		dondo De Castillo					
1 -	btor 2						
.	ited States Bankruptcy Court for the	e: EASTERN DISTRICT	OF CALIFORNIA				
1	se number		_		Check if this is		
					☐ A supplem	ent showing post as of the followin	
	fficial Form 106I				MM / DD/ `	/YYY	
S	chedule I: Your Inc	ome					12/15
Pai	ch a separate sheet to this form. t1: Describe Employment	On the top of any additi	ional pages, write y	our name and	I case number (if	known). Answe	every question
1.	Fill in your employment information.		Debtor 1		Debtor	2 or non-filing s _l	oouse
	If you have more than one job, attach a separate page with	Employment status	☐ Employed		☐ Empl	oyed	
	information about additional employers.	,	■ Not employed		☐ Not €	mployed	
	• •	Occupation					
	Include part-time, seasonal, or self-employed work.	Employer's name					
	Occupation may include student or homemaker, if it applies.	Employer's address					
		How long employed t	here?				
Pai	Give Details About Mo	nthly Income					
	mate monthly income as of the duse unless you are separated.	late you file this form. If	you have nothing to	report for any	line, write \$0 in the	space. Include y	our non-filing
	ou or your non-filing spouse have mee space, attach a separate sheet to		ombine the informati	on for all empl	oyers for that perso	on on the lines be	low. If you need
					For Debtor 1	For Debtor 2 non-filing spo	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2. \$	0.00	\$	N/A

0.00

0.00

+\$

\$

N/A

N/A

3.

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

Deb	otor 1	Leticia Arredondo De Castillo	_	Case	number (if known)			
				For	r Debtor 1	For Debto		
	Cop	y line 4 here	4.	\$	0.00	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	-
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	-
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	-
	5g.	Union dues	5g.	\$	0.00	\$	N/A	•
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/A	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				•		
	O.L.	monthly net income.	8a.	\$_	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Tulare County - Food Stamps	8f.	\$_	468.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A	
	8h.	Other monthly income. Specify: Friends Children Child Care	8h.+	\$_	300.00	+ \$	N/A	-
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	768.00	\$	N/A	1
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		768.00 + \$_	N/A	= \$	768.00
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: Son Christian Castillo - Contribution to the Household	depen		•		_	1,200.00
		Son Francisco Castillo - Contribution to the Household					\$	1,100.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					. \$Combin	3,068.00 ned
40	Γ.		^					y income
13.		you expect an increase or decrease within the year after you file this form No.	7					
		Yes. Explain:						

Fillip	this informe	tion to identify yo	ur caca:			1		
				_		<u>.</u>		
Debtor	r 1	Leticia Arred	londo De	e Castillo			k if this is: An amended filing	
Debtor	r 2						A supplement show	ing postpetition chapter
(Spous	se, if filing)					1	13 expenses as of t	he following date:
United	l States Bankr	ruptcy Court for the:	EASTE	ERN DISTRICT OF CALIFO	ORNIA	1	MM / DD / YYYY	
Case r (If know	number wn)							
Offi	icial Fo	rm 106J						
Sch	hedule	J: Your I	 Exper	nses				12/15
Be as	complete a mation. If m per (if know	and accurate as	possible eded, atta y questio	e. If two married people a ach another sheet to this				
	s this a joir		iioiu					
	■ No. Go to		n a conqu	rate household?				
	⊔ Tes. Doe □ N		ii a sepai	ate flousefloid?				
	_		t file Offic	ial Form 106J-2, Expense	s for Separate House	ehold of Debto	or 2.	
2. [Do you hav	e dependents?	□ No	•	•			
	•	•		Fill and this information for	Dan an dantia nalati	: ! : 4-	Danier danis	Dana damandant
	Do not list D Debtor 2.	eptor i and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
C	dependents	names.			Son			Yes
					Son			□ No ■
					3011			■ Yes □ No
								□ No □ Yes
								□ No
								☐ Yes
		enses include		I _{No}				
		f people other th d your depender		l Yes				
exper	nate your ex		our bankr	ly Expenses uptcy filing date unless y cy is filed. If this is a sup				
Includ	de expense	s paid for with r	ion-cash	government assistance	if vou know			
the va		n assistance and		cluded it on Schedule I:			Your expe	enses
		or home ownersland any rent for the		nses for your residence. or lot.	Include first mortgag	e 4. \$		0.00
ŀ	f not includ	led in line 4:						
4	4a. Real e	estate taxes				4a. \$		0.00
4		rty, homeowner's				4b. \$		0.00
				upkeep expenses		4c. \$		75.00
		owner's associati			and another to see	4d. \$		0.00
5. <i>I</i>	Additional r	nortgage pavme	ents for v	our residence, such as ho	ome equity loans	5. \$		0.00

Debtor	1 Leticia Arredondo De Castillo	Case num	ber (if known)	
6. U	tilities:			
6. U		6a.	\$	121.00
61	•	6b.	·	97.00
6		6c.		150.00
6		6d.		0.00
	ood and housekeeping supplies	ou.	\$	
	hildcare and children's education costs	7. 8.	\$	900.00
				0.00
	lothing, laundry, and dry cleaning	9.	\$	100.00
	ersonal care products and services	10.	·	65.00
	edical and dental expenses	11.	\$	35.00
	ransportation. Include gas, maintenance, bus or train fare. o not include car payments.	12.	\$	175.00
	onormicide car payments. ntertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	haritable contributions and religious donations	14.	·	
	surance.	14.	Φ	0.00
-	o not include insurance deducted from your pay or included in lines 4 or 20.			
	5a. Life insurance	15a.	\$	0.00
	5b. Health insurance	15b.	·	0.00
	5c. Vehicle insurance	15c.		65.00
	5d. Other insurance. Specify:	15d.	·	0.00
	axes. Do not include taxes deducted from your pay or included in lines 4 or 20.	130.	Ψ	0.00
	pecify:	16.	\$	0.00
	stallment or lease payments:		<u> </u>	0.00
	7a. Car payments for Vehicle 1	17a.	\$	0.00
	7b. Car payments for Vehicle 2	17b.	·	0.00
	7c. Other. Specify:	17c.	·	0.00
	7d. Other. Specify:	17d.	·	0.00
	our payments of alimony, maintenance, and support that you did not report as		Ψ	0.00
	educted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
	ther payments you make to support others who do not live with you.		\$	0.00
	pecify:	19.	<u> </u>	0.00
	ther real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e		our Income.	
	Da. Mortgages on other property	20a.		0.00
	b. Real estate taxes	20b.	\$	0.00
	c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	Od. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	De. Homeowner's association or condominium dues	20e.	·	0.00
	ther: Specify:	21.	·	0.00
21. 0	uner: opeony.		ΤΨ	0.00
22. C	alculate your monthly expenses			
2	2a. Add lines 4 through 21.		\$	1,783.00
2	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	2c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,783.00
	· · ·			
	alculate your monthly net income.			
	Ba. Copy line 12 (your combined monthly income) from Schedule I.	23a.	*	3,068.00
23	Bb. Copy your monthly expenses from line 22c above.	23b.	-\$	1,783.00
23	Bc. Subtract your monthly expenses from your monthly income.	00:	•	1 295 00
	The result is your monthly net income.	23c.	\$	1,285.00
04 -		(1)		
	o you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect you			or decrease because of a
	or example, do you expect to finish paying for your car loan within the year or do you expect you polification to the terms of your mortgage?	i mongage (Jayment to merease	e or decrease because or a
	No.			
	Voc. Evolain here:			

Yes. Explain here:

Fill in this inform	nation to identify your	case:				
Debtor 1	Leticia Arredond	o De Castillo				
	First Name	Middle Name	Las	t Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Las	st Name		
			05 041 1505	AN 11 A		
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT (OF CALIFOR	INIA		
Case number						
(if known)						☐ Check if this is an
						amended filing
Official Form	n 106Dec					
		an Individua	l Deht	or's Sch	adulas	40/45
Deciarat	ion About t	an marviada	DCDU	01 3 00110	<u> </u>	12/15
If two married pe	ople are filing togethe	r, both are equally respo	onsible for s	upplying correct	information.	
Var. must file this	farm whanever weref	والباد و مورد برواد الماد الما		ad aabadulaa Ma	lsing a false stat	amont conscaling property or
						ement, concealing property, or 00, or imprisonment for up to 20
	3 U.S.C. §§ 152, 1341, 1		, ,		•	•
Sign	n Below					
O.g.						
Did you pay	or agree to pay some	one who is NOT an atto	rney to help	you fill out bank	ruptcy forms?	
■ No						
■ Ves N	lame of person				Attach Bar	nkruptcy Petition Preparer's Notice,
☐ 163. IV						n, and Signature (Official Form 119)
Under penal	ty of periury. I declare	that I have read the sun	nmary and s	chedules filed wi	ith this declarati	on and
	true and correct.					
Y /s/lotic	cia Arredondo De C	astillo	х			
	Arredondo De Cast		^	Signature of Deb	otor 2	
	e of Debtor 1			- J		
Date A	November 15, 2018			Date		
Date N	10 verilber 13, 2016					

Fill	in this inform	nation to identify you	r case:							
	tor 1	Leticia Arredono								
		First Name	Middle Name	Last Name						
	tor 2 use if, filing)	First Name	Middle Name	Last Name						
	. 0,		EASTERN DISTRICT OF							
Unit	ed States Bar	kruptcy Court for the:	EASTERN DISTRICT OF	CALIFORNIA						
Cas (if kno	e number				_	heck if this is an mended filing				
Sta		of Financial		duals Filing for B		4/16				
infor	mation. If me		attach a separate sheet to		equally responsible for supposed additional pages, write you					
Part	Give D	etails About Your Ma	rital Status and Where You	Lived Before						
1.	What is your	current marital statu	ıs?							
	☐ Married■ Not married	ried								
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?						
	_									
	_	No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.								
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
					ity property state or territory co, Texas, Washington and W					
	□ No									
	Yes. Ma	ke sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).						
Pari	Evolaii	n the Sources of You	r Incomo							
Гап	Explain	in the Sources of You	rincome							
	Fill in the tota	I amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?				
	□ No									
	_	in the details.								
			Debtor 1		Debtor 2					
			Sources of income	Gross income	Sources of income	Gross income				
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)				
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$1,521.70	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

Debtor 1 Leticia Arredondo De Castillo

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	☐ Wages, commissions, bonuses, tips	\$2,700.00	☐ Wages, commissions, bonuses, tips	
	Operating a business		☐ Operating a business	
For last calendar year: (January 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$10,004.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$6,800.00	☐ Wages, commissions, bonuses, tips	
	Operating a business		☐ Operating a business	
and other public benefit payments; winnings. If you are filing a joint cast List each source and the gross inco No Yes. Fill in the details.	se and you have income that y	you received together, list it o	nly once under Debtor 1.	d gambling and lottery
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Spousal's Social Security Benefits	\$2,098.00		
	Social Security Benefits (son)	\$2,098.00		
	Social Security Benefits (son)	\$904.00		
	Contribution to the Household	\$22,600.00		
	Tulareworks Governmental Food Stamps Assistance	\$5,296.00		
	Child Care	\$700.00		
For last calendar year: (January 1 to December 31, 2017)	Spousal's Social Security Benefits	\$8,876.00		

Deb	otor 1	Le	ticia Arred	londo De Castillo		Cas	se number (if knowr))		
Par	t 3:	List	Certain Pay	yments You Made Bet	fore You Filed for Bankru	ıptcy				
6.	Are		Neither De	•	as primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an family, or household purpose."					
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6.425* or										
			□ No.	Go to line 7.						
			Yes	List below each credit paid that creditor. Do not include payments o adjustment on 4/01/1	lomestic support oblic kruptcy case.	gations, such as o	child support a	nd alimony. Also, do		
		Yes.	Debtor 1 o	r Debtor 2 or both ha	ve primarily consumer do d for bankruptcy, did you p	ebts.		·		
			■ No.	Go to line 7.						
			☐ Yes	List below each credit	tor to whom you paid a tota domestic support obligatio ruptcy case.					
	Cre	ditor's	s Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Was this p	ayment for	
	a bu alim	siness ony. No Yes. I	you operate	e as a sole proprietor. 1	n control, or owner of 20% of 11 U.S.C. § 101. Include pa	Total amount	support obligation Amount you still owe	ns, such as ch	r this payment	
8.	insi	der?	•	you filed for bankrupt	ccy, did you make any pa	yments or transfer a	any property on	account of a	lebt that benefited an	
		No Voc I	ist all navm	ents to an insider						
	☐ Yes. List all payments to an insider Insider's Name and Address				Dates of payment	Total amount	Amount you	Reason fo	r this payment	
						paid	still owe	Include cre	ditor's name	
Par	t 4:	Iden	tify Legal A	ctions, Repossession	ns, and Foreclosures					
9.	List	all suc	h matters, in		ccy, were you a party in a cases, small claims action					
		No Yes. I	Fill in the det	tails.						
		se title			Nature of the case	Court or agency		Status of t	he case	
10.	With	in 1 y	ear before y	you filed for bankrupt d fill in the details belo	ccy, was any of your prop w.	erty repossessed, f	oreclosed, garn	ished, attache	ed, seized, or levied?	
			to to line 11.							
	⊔ Cre		Fill in the info Name and <i>A</i>	ormation below.	Describe the Property		Date		Value of the	
	516	anoi i	Taine and F				Date		property	
					Explain what happene	u				

De	ebtor 1 Leticia Arredondo De Castillo	Case number	ſ (if known)						
11.	Within 90 days before you filed for banks accounts or refuse to make a payment b No Yes. Fill in the details.	ruptcy, did any creditor, including a bank or financial in ecause you owed a debt?	stitution, set off any a	mounts from your					
	Creditor Name and Address	Describe the action the creditor took	Date action was	Amount					
			taken						
12.	court-appointed receiver, a custodian, o	/ithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a ourt-appointed receiver, a custodian, or another official?							
	■ No □ Yes								
Pai	rt 5: List Certain Gifts and Contribution	s							
		uptcy, did you give any gifts with a total value of more	than \$600 per person?	?					
	■ No		voce per person.						
	Yes. Fill in the details for each gift.		_						
	Gifts with a total value of more than \$60 per person	0 Describe the gifts	Dates you gave the gifts	Value					
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or o	uptcy, did you give any gifts or contributions with a tot ontribution.	al value of more than	\$600 to any charity?					
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	ŕ	Dates you contributed	Value					
Pa	rt 6: List Certain Losses								
15.	Within 1 year before you filed for bankru or gambling?	ptcy or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster					
	■ No □ Yes. Fill in the details.								
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i>	Date of your loss	Value of property lost					
Pai	rt 7: List Certain Payments or Transfers	3							
16.	consulted about seeking bankruptcy or	ptcy, did you or anyone else acting on your behalf pay oreparing a bankruptcy petition? oreparers, or credit counseling agencies for services require		rty to anyone you					
	□ No■ Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	Description and value of any property transferred	Date payment or transfer was made	Amount of payment					
	Scott Lyons Attorney At Law 1010 W. Main Street Visalia, CA 93291 scottlyons@lyons4justice.com	Attorney Fees	9/28/2018	\$1,000.00					

Debtor 1 Leticia Arredondo De Castillo

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and val transferred	ue of any prope	erty	Date payment or transfer was made	Amount of payment				
	Scott Lyons Attorney At Law 1010 W. Main Street Visalia, CA 93291 scottlyons@lyons4justice.com	Filing Fees \$310.0	00		11/14/2018	\$310.00				
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.									
	NoYes. Fill in the details.									
	Person Who Was Paid Address	Description and val transferred	ue of any prope	erty	Date payment or transfer was made	Amount of payment				
18.	Within 2 years before you filed for bankruptcy,			sfer any pro _l	perty to anyone, other	than property				
	transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No									
	Yes. Fill in the details. Person Who Received Transfer	Describe	any property or	Date transfer was						
	Address Person's relationship to you	Description and val property transferred			received or debts	made				
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No									
	Yes. Fill in the details.									
	Name of trust	Description and val	ue of the prope	rty transfer	red	Date Transfer was made				
Par	8: List of Certain Financial Accounts, Instru	uments, Safe Deposit B	Soxes, and Stora	age Units						
 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brok houses, pension funds, cooperatives, associations, and other financial institutions. No 										
	☐ Yes. Fill in the details. Name of Financial Institution and	ast 4 digits of	Type of accoun	t or Da	ate account was	Last balance				
	Address (Number, Street, City, State and ZIP Code)	ccount number i	nstrument	me	osed, sold, oved, or ansferred	before closing or transfer				
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	ır before you filed for b	ankruptcy, any	safe deposi	it box or other deposi	tory for securities,				
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acces Address (Number, Stre State and ZIP Code)		escribe the	contents	Do you still have it?				

Debtor 1	Loticia	Arradanda	De Castillo

22.	Hav	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
		No Yes. Fill in t	he details.							
		me of Storag dress (Number	e Facility Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?				
Par	t 9:	Identify Pro	operty You Hold or Control fo	r Someone Else						
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in tru for someone.										
		No Vos Fill in	the details							
	☐ Yes. Fill in the details.Owner's NameWhere is the property?Describe the property									
	_		Street, City, State and ZIP Code)	(Number, Street, City, State and ZIP Code)	Docume and property	Value				
Par	t 10:	Give Detail	s About Environmental Inform	nation						
For	the p	ourpose of Pa	art 10, the following definition	s apply:						
	toxi	c substances	s, wastes, or material into the	-	ning pollution, contamination, release Iwater, or other medium, including s					
		-			aw, whether you now own, operate,	or utilize it or used				
			or utilize it, including disposa rial means anything an enviro		waste, hazardous substance, toxic	substance				
_			ial, pollutant, contaminant, or		, masto, mazarabas basbianos, texto	oubotanoo,				
Rep	ort a	II notices, rel	eases, and proceedings that y	you know about, regardless of wher	they occurred.					
24.	Has	any governn	nental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environm	ental law?				
		■ No								
		Yes. Fill in t	he details.							
		me of site dress (Number	Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Hav	e you notifie	d any governmental unit of an	y release of hazardous material?						
		No Yes. Fill in t	he details.							
		me of site dress (Number	Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Hav	e you been a	party in any judicial or admin	istrative proceeding under any envi	ronmental law? Include settlements	and orders.				
		No Yes. Fill in t	he details.							
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	t 11:	Give Detail	s About Your Business or Co	nnections to Any Business						
27.	With	nin 4 years be	efore you filed for bankruptcy	, did you own a business or have an	y of the following connections to an	y business?				
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
		☐ A membe	er of a limited liability compan	y (LLC) or limited liability partnersh	ip (LLP)					
Offici	al Foi	rm 107	Statement	of Financial Affairs for Individuals Filing	for Bankruptcy	page 6				

Debtor	1 Leticia Arredondo De Castillo	(Case number (if known)
	☐ A partner in a partnership		
	☐ An officer, director, or managing ex	ecutive of a corporation	
	☐ An owner of at least 5% of the votin	g or equity securities of a corporation	
	No. None of the above applies. Go to B	Part 12.	
	Yes. Check all that apply above and fill	I in the details below for each business.	
	ısiness Name Idress	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
(Nu	imber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
	thin 2 years before you filed for bankrupt titutions, creditors, or other parties.	tcy, did you give a financial statement to	anyone about your business? Include all financial
	No Yes. Fill in the details below.		
Ac	nme Idress _{Imber} , Street, City, State and ZIP Code)	Date Issued	
Part 12	Sign Below		
are true with a b 18 U.S.0	and correct. I understand that making a		I declare under penalty of perjury that the answers obtaining money or property by fraud in connection years, or both.
	a Arredondo De Castillo ure of Debtor 1	Signature of Debtor 2	
Date	November 15, 2018	Date	
Did you ■ No □ Yes	attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Fil	ling for Bankruptcy (Official Form 107)?
■ No		t an attorney to help you fill out bankrup	

Fill in this information to identify your case:							
Debtor 1	Leticia Arredondo De Castillo						
Debtor 2 (Spouse, if filing)							
United States E	Bankruptcy Court for the: Eastern District of California						
Case number (if known)							

Check	Check as directed in lines 17 and 21:							
	According to the calculations required by this Statement:							
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	1: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one o	nly.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11.							
10 th	Il in the average monthly income that you received from all 1(10A). For example, if you are filing on September 15, the 6-re 6 months, add the income for all 6 months and divide the tota ouses own the same rental property, put the income from that	month perio al by 6. Fill i	d would n the re	l be March 1 thro sult. Do not inclu	ough a	August 31. If the amount m	ount of your monthly incomore than once. For example	e varied during e, if both
						olumn A ebtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	, and com	missio	ons (before all	\$_	240.96	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	e payment	s from	a spouse if	\$_	0.00	\$	
4.	All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your househol and roommates. Do not include payments from a spouyou listed on line 3.	t. Include ld, your de	regular epende	contributions nts, parents,		2,300.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor 1						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here -:	> \$ _	0.00	\$	
6.	Net income from rental and other real property	Debtor 1						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	- \$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here -:	>\$	0.00	\$	

Debtor 1	Leticia Arredondo De Castillo		Case number	er (<i>if known</i>)			
			Column A Debtor 1		Column E	or	
			•	0.00	non-filing	y spouse	
	terest, dividends, and royalties		\$	0.00	Φ		
	nemployment compensation		\$	0.00	\$		
th	o not enter the amount if you contend that the amount received was a benefite Social Security Act. Instead, list it here:		r				
	For you \$ 0.0 For your spouse \$	00					
	ension or retirement income. Do not include any amount received that was enefit under the Social Security Act.	s a	\$	0.00	\$		
Do re do	come from all other sources not listed above. Specify the source and am o not include any benefits received under the Social Security Act or payment ceived as a victim of a war crime, a crime against humanity, or international of mestic terrorism. If necessary, list other sources on a separate page and putal below.	ts or					
	Child Care		\$	116.67	\$		
			\$	0.00	\$		
	Total amounts from separate pages, if any.	+	\$	0.00	\$		
	alculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$	2,657.63	+ \$_		= \$	2,657.63
Part 2:	Determine How to Measure Your Deductions from Income						tal average onthly income
	opy your total average monthly income from line 11.					\$	2,657.63
	You are not married. Fill in 0 below.						
	You are married and your spouse is filing with you. Fill in 0 below.						
	You are married and your spouse is not filing with you.						
	Fill in the amount of the income listed in line 11, Column B, that was NOT dependents, such as payment of the spouse's tax liability or the spouse's						
	Below, specify the basis for excluding this income and the amount of incoadjustments on a separate page.	ome de	voted to each	h purpose	e. If necessar	y, list addi	tional
	If this adjustment does not apply, enter 0 below.						
		\$_ \$					
		Ψ — + \$					
		ΙΨ_					
	Total	\$_	0.0	00 Co	ppy here=>		0.00
14. \	Your current monthly income. Subtract line 13 from line 12.					\$	2,657.63
15. (Calculate your current monthly income for the year. Follow these steps:						
1	15a. Copy line 14 here=>					\$	2,657.63
	Multiply line 15a by 12 (the number of months in a year).					X	12
1	15b. The result is your current monthly income for the year for this part of the	ne form				\$	31,891.56

Debto	r 1	Letic	ia Arredondo De Castillo			Case number (if know	wn)		
16.	Cal	culate t	the median family income that applies to	vou. Fo	llow these ster	os:			
			the state in which you live.	,	CA				
	405	- ::::::::::::::::::::::::::::::::::::	the combined of the color						
			the number of people in your household. the median family income for your state and	eize of l	household			•	94,505.00
	100	To find	d a list of applicable median income amounts ctions for this form. This list may also be ava	s, go on	line using the l		te	\$	34,000.00
17.	Hov	do th	e lines compare?						
	17a	. •	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N				•		
	17b	. 🗆	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 a	ulation					
Part	3:	Calc	culate Your Commitment Period Under 11	U.S.C.	§ 1325(b)(4)				
18.	Cop	y your	total average monthly income from line 1	11.			\$		2,657.63
19.	con	end tha	e marital adjustment if it applies. If you are at calculating the commitment period under 1 come, copy the amount from line 13.	marrie	d, your spouse 2. § 1325(b)(4)	is not filing with you, and yallows you to deduct part	you of your		
	19a	. If the r	marital adjustment does not apply, fill in 0 on	line 19	a.		-\$		0.00
	19b	Subtra	act line 19a from line 18.					\$	2,657.63
20.	Cal	culate	your current monthly income for the year.	. Follow	v these steps:				
	20a	Сору	line 19b					\$	2,657.63
		Multip	ly by 12 (the number of months in a year).					X	12
	20b	. The re	esult is your current monthly income for the y	ear for t	this part of the	form		\$	31,891.56
	20c	Сору	the median family income for your state and	size of	household fror	n line 16c		\$	94,505.00
	21.	How o	do the lines compare?						
			ine 20b is less than line 20c. Unless otherwine in 3 years. Go to Part 4.	ise orde	red by the cou	rt, on the top of page 1 of t	this form, check bo	x 3, <i>Th</i>	ne commitment
			ine 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	nless oth	herwise ordere	d by the court, on the top o	of page 1 of this fo	rm, che	eck box 4, The
Part	4:	Sigr	n Below						
	By s	igning	here, under penalty of perjury I declare that t	the infor	rmation on this	statement and in any attac	chments is true an	d corre	ct.
Х			ia Arredondo De Castillo						
			Arredondo De Castillo of Debtor 1						
	•	Nov	rember 15, 2018						
	If vo		/ DD / YYYY ked 17a, do NOT fill out or file Form 122C-2.						
	-		ked 17b, fill out Form 122C-2 and file it with		n. On line 39 o	f that form, copy your curre	ent monthly income	e from I	line 14 above.

Debtor 1 Leticia Arredondo De Castillo

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 05/01/2018 to 10/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Durango Farm Management, Inc.

Income by Month:

6 Months Ago:	05/2018	\$143.20
5 Months Ago:	06/2018	\$1,302.58
4 Months Ago:	07/2018	\$0.00
3 Months Ago:	08/2018	\$0.00
2 Months Ago:	09/2018	\$0.00
Last Month:	10/2018	\$0.00
	Average per month:	\$240.96

Line 4 - Contributions to household expenses of the debtor or dependents

Source of Income: Christian Castillo

Income by Month:

6 Months Ago:	05/2018	\$1,200.00
5 Months Ago:	06/2018	\$1,200.00
4 Months Ago:	07/2018	\$1,200.00
3 Months Ago:	08/2018	\$1,200.00
2 Months Ago:	09/2018	\$1,200.00
Last Month:	10/2018	\$1,200.00
	Average per month:	\$1,200.00

Line 4 - Contributions to household expenses of the debtor or dependents

Source of Income: Francisco Castillo

Income by Month:

6 Months Ago:	05/2018	\$1,000.00
5 Months Ago:	06/2018	\$1,000.00
4 Months Ago:	07/2018	\$1,000.00
3 Months Ago:	08/2018	\$1,200.00
2 Months Ago:	09/2018	\$1,200.00
Last Month:	10/2018	\$1,200.00
	Average per month:	\$1,100.00

Line 10 - Income from all other sources

Source of Income: Child Care

Income by Month:

6 Months Ago:	05/2018	\$0.00
5 Months Ago:	06/2018	\$0.00
4 Months Ago:	07/2018	\$0.00
3 Months Ago:	08/2018	\$0.00
2 Months Ago:	09/2018	\$400.00
Last Month:	10/2018	\$300.00
	Average per month:	\$116.67

Debtor 1 Leticia Arredondo De Castillo

Case number (if known)

Non-CMI - Social Security Act Income

Source of Income: Son Freddy Castillo Benefits

Income by Month:

\$113.00
\$511.00
\$0.00
\$0.00
\$0.00
\$0.00
\$104.00

Non-CMI - Social Security Act Income

Source of Income: Son Richard Castillo Benefits

Income by Month:

6 Months Ago:	05/2018	\$113.00
5 Months Ago:	06/2018	\$511.00
4 Months Ago:	07/2018	\$0.00
3 Months Ago:	08/2018	\$0.00
2 Months Ago:	09/2018	\$0.00
Last Month:	10/2018	\$0.00
	Average per month:	\$104.00

Non-CMI - Social Security Act Income

Source of Income: Spousal Social Security Benefits

Income by Month:

6 Months Ago:	05/2018	\$113.00
5 Months Ago:	06/2018	\$511.30
4 Months Ago:	07/2018	\$511.30
3 Months Ago:	08/2018	\$0.00
2 Months Ago:	09/2018	\$0.00
Last Month:	10/2018	\$0.00
	Average per month:	\$189.27

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of California

In re	Leticia Arredondo De Castillo		Case No.			
		Debtor(s)	Chapter	13		
	DISCLOSURE OF COMPEN	NSATION OF ATTOI	RNEY FOR DE	EBTOR(S)		
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$	4,000.00		
	Prior to the filing of this statement I have received		\$	1,000.00		
	Balance Due		\$	3,000.00		
2.	310.00 of the filing fee has been paid.					
3.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
4.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
5.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are mem	bers and associates of my law firm.		
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the nan					
6.	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspect	s of the bankruptcy c	ase, including:		
1	 Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed] 	ement of affairs and plan which	may be required;			
 By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any adversary proceeding. 						
		CERTIFICATION				
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.						
٨	ovember 15, 2018	/s/ Scott Lyons				
\overline{D}	ate	Scott Lyons 1039				
Signature of Attorney Law Office of Scott Lyons						
1010 West Main Street						
Visalia, CA 93291 559-636-8122 Fax: 559-636-0463						
		scottlyons@lyon				
		Name of law firm				

ERC/Enhanced Recovery Corp Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256

ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

Franchise Tax Board Bankruptcy Section, MS: A-340 P.O. Box 2952 Sacramento, CA 95812-2952

Internal Revenue Service Centralized Insolvency Operations P.O. Box 7346 Philadelphia, PA 19101-7346

Shellpoint Mortgage Servicing P.O. Box 740039 Cincinnati, OH 45274-0039

United States Attorney for Internal Revenue Service 2500 Tulare Street Ste. 4401 Fresno, CA 93721-1318

United States Department of Justice Civil Trial Section, Western Region Box 683, Ben Franklin Station Washington, DC 20044